

Rhode Island Board of Licensure for Physician Assistants 2019 Annual Report

JANUARY 2020



Introduction

Licensing Boards serve an important and often unrecognized service as they quietly protect the public. Assurance of a competent workforce is one the 10 essential public health services recognized by the Centers for Disease Control and Prevention (CDC)ⁱ. Board members possess unique technical expertise and function within a Just Culture as they exercise this duty. Complex issues that surround complaint investigations, health policy, establishment of rules and regulations and issuance of licenses are some examples of these important duties.

The mission of the Rhode Island Board of Licensure of Physician Assistants (Board) is to protect the public through enforcement of standards for medical licensure and ongoing clinical competence. The Board has seven members – three who are Physician Assistants (PA), two who are physicians, and two who are members of the public. Board members receive no compensation of any type for their hours of service annually.

PA Board Members	
Philip Zingale, PA-C	PA member
Victoria Miller, PA-C	PA member
Aleko Kimbouris, PA-C	PA member
Guy Nicastri, MD	Physician member
Victor Pinkes, MD	Physician member
Rosemary Sheets	Public member
James Carney	Public member

The Board extends its thanks to outgoing Board members Twila McInnis and Rebecca Hassel, PA-C.

The Board welcomed new members Rosemary Sheets, James Carney, Dr. Guy Nicastri, Dr. Victor Pinkes, and Aleko Kimbouris, PA-C.

The Board meets quarterly at the Rhode Island Department of Health (RIDOH) in Providence. Any member of the public can attend the open session.

The Board is housed entirely within RIDOH, and is staffed by RIDOH employees who divide their time to effectively ensure the Board has the resources it needs to function at the highest level.

Board Staff	
James V. McDonald; MD, MPH	Chief Administrative Officer
Morgan Goulet, Esq.	Senior Legal Counsel
Lauren Dixon-Lasso	Board Manager
Linda Julian	Board Investigator
Angela Phengsavatdy	Licensing Officer

Licensing

Licensing of PAs, by examination or by endorsement. represents one of the essential functions of the Board. Ensuring that PAs who are allowed to practice medicine in Rhode Island are competent, ethical, and professional is critical to the licensing process.

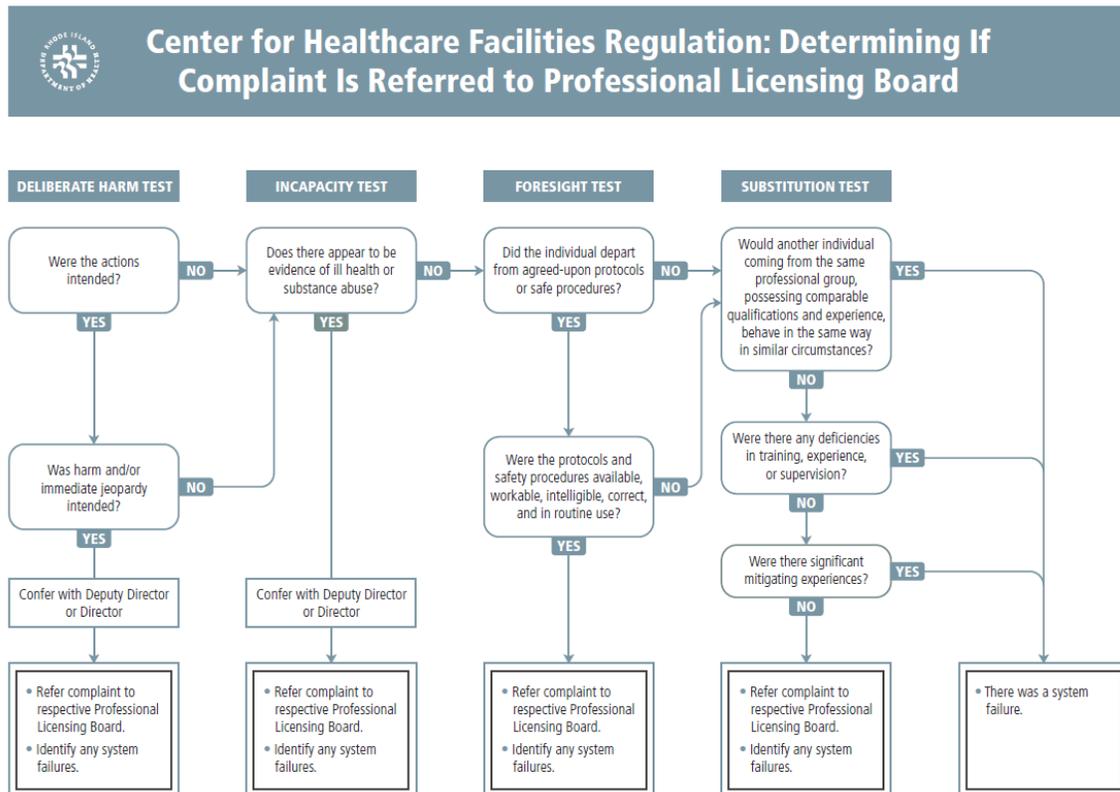
PA Licensing		
	2018	2019
PA licenses issued	88	98
PA license applications withdrawn	0	0
PA license applications denied	0	0
Average number of days to receive PA license	16	17
Percentage of licenses approved in less than three days after receipt of final documents	100%	100%

PA Licenses, By Type	
	As of 12/31/2019
Physician assistant	627
Physician assistants with a Controlled Substance Registration	547

Just Culture

Health equity and justice extends to all areas of RIDOH, so codifying Just Culture was a natural extension of this leadership vision that was accomplished in 2019. In the open session of the September 2019 meeting, the Board adopted a framework of decision making regarding complaints at various stages in the complaint process.

The figure below illustrates how a complaint that originates with the Center for Healthcare Facilities Regulation would be reviewed, and ultimately, if it would be referred to the Board. This framework was based on input at several open meetings with the Board as well as previously published workⁱⁱ.



In September 2012, the Board approved delegation of opening complaints to RIDOH staff, and in 2019, the Board codified this approach in the framework illustrated below.

Often when a complaint is filed there is usually a desire, on the part of the complainant, to assign blame. The Board investigates complaints and strives to achieve consistent and just outcomes for all parties involved. If an investigation is opened, the Board needs to determine if a PA must be held accountable or if the error/issue was more likely caused by systems issues beyond the control of the PA.

Utilizing the *Deliberate Harm Test*, *Incapacity Test*, *Foresight Test*, and *Substitution Test* helps the Board arrive at consistent decisions which protect the public and hold Pas accountable.

The Board uses the *Deliberate Harm Test*, *Incapacity Test*, *Foresight Test*, and *Substitution Test* to evaluate each new complaint regardless of origin. These tests are based on lessons learned from other industries that evaluate errors and mistakes in the context of a safety and Just culture.ⁱⁱⁱ

INSERT UPDATED OLIVE GREEN DECISION CHART

INSERT UPDATED RUST DECISION CHART

Rules and Regulations for Licensure of Physician Assistants

There were no changes to the *Rules and Regulations* for PAs in 2019.

Continuing Medical Education (CME) Activities

The Board, in conjunction with RIDOH, sponsored several CME events in 2019 at various hospitals, physician group practices, educational facilities, and professional society meetings that specifically addressed the opioid crisis, responsible prescribing, and appropriate treatment of pain. The program, *Practical Solutions to Prescribing Medication Assisted Treatment* (<https://cme-learning.brown.edu/MAT19>) was offered at Brown's Alpert School of Medicine in September and is now available for CME online. The Board and RIDOH continue to go to extraordinary lengths to educate physicians on the importance of understanding addiction and its treatment, appropriate treatment of pain, and responsible prescribing of controlled substances.

Complaints and Disciplinary Actions

An essential role of the Board is to investigate and adjudicate complaints. Complaints come from a variety of sources, including patients, patient advocates, notices of litigation, licensed facilities, pharmacists, physicians, and other healthcare professionals. Each complaint is reviewed prior to being opened for complete investigation. The complaint process for physicians is detailed in a flow chart at <http://health.ri.gov/complaints/physician/>.

Summary of Annual Complaint Activity		
	2018	2019
Complaints received	15	14
Complaints opened for investigation	8	6
Complaints adjudicated by full Board	7	3
Suspensions	1	0
Voluntary agreements not to practice medicine/surrender of license	0	0
License reinstatements/ activations with disciplinary actions	1	0
Reprimands and related sanctions	3	0
Revocations	0	0
Public adverse actions	5	0

Revenue

Revenue generated from licensing and registration fees is sent to the General Treasurer of the State of Rhode Island, and Board operations are funded by RIDOH. License fees account for the vast majority of revenue for the state as reflected in the table below. PA licenses are renewed by June 30, of odd years; therefore, revenue varies significantly between renewal cycles. Revenue is also generated by fees paid to renew Controlled Substance Registrations (CSR). There is a fee for verification of a Rhode Island PA license, which sends real-time license verification to state medical boards as requested. RIDOH offers primary source verification at no charge, at http://209.222.157.144/RIDOH_Verification/Search.aspx?facility=N&SubmitComplaint=Y. The Board is not authorized to issue fines for disciplinary actions, and is one of only a few states in the country that lack this authority. The Board does have the authority to issue administrative fees which reflect the actual costs associated with investigating a complaint.

Annual Revenue from PA-Related Fees					
	2015	2016	2017	2018	2019*
License Fees¹	\$53,520	\$10,720	\$62,370	\$14,820	\$74,780
CSR Fees²	\$84,000	\$16,400	\$100,650	\$14,000	\$113,200
Total Annual Fees	\$137,520	\$27,120	\$163,020	\$28,820	\$187,980

* 2019 revenue received to as of 12/31/2019.

¹ L2K – Revenue Reports – Physician Assistant.

² L2K – Revenue Reports – CSR-Physician Assistant.

Conclusion

The Board made significant accomplishments in 2019, highlighted by codifying Just Culture and publishing its framework for decision making regarding compliant investigations. This reflects transparency, justice, equity, and consistency with RIDOH's organizational values.

The Board does anticipate updating rules and regulations to be consistent with changes in the governing statute in 2020 and will be seeking stakeholder and public input soon.

The Board is composed of highly respected, wise, and committed volunteers who give of themselves and their time to carry out its critical mission. The BMLD is vigilant and consistent in its mission to protect the public and does so in the spirit of equity and justice.

ⁱ "CDC - Public Health System and the 10 Essential Public Health Services - OSTLTS." *Centers for Disease Control and Prevention*, Centers for Disease Control and Prevention, 26 June 2018,

<https://www.cdc.gov/publichealthgateway/publichealthservices/essentialhealthservices.html>.

ⁱⁱ Reason, James, and Alan Hobbs. *Managing Maintenance Error*. Ashgate, 2003

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